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PTO/SB/05 (11-00)

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications
under 37 CFR 1.53(b))Attorney Docket No. **670091.401**First Inventor **Fernando Stroppiana**Title **PROCESS FOR PRODUCING A
COVERING OF AN ELASTOMER
MATERIAL AND INTERMEDIATE
PRODUCT THEREOF**Express Mail Label No. **EV347012659US**

03940 05/08/03
10/637845
PTO



1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)	
2. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i>	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (<i>if applicable, all necessary</i>)	
3. <input checked="" type="checkbox"/> Specification [Total Pages <u>11</u>]	a. <input type="checkbox"/> Computer Readable Form (CRF)	
- Descriptive title of the Invention	b. <input type="checkbox"/> Specification Sequence Listing on:	
- Cross Reference to Related Applications	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or	
- Statement Regarding Fed sponsored R & D	ii. <input type="checkbox"/> paper	
- Reference to sequence listing, a table, or a computer program listing appendix	c. <input type="checkbox"/> Statements verifying identity of above copies	
- Background of the Invention	ACCOMPANYING APPLICATION PARTS	
- Brief Summary of the Invention	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
- Brief Description of the Drawings (<i>if filed</i>)	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (<i>when there is an assignee</i>)	
- Detailed Description	11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)	
- Claim(s)	12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
- Abstract of the Disclosure	13. <input type="checkbox"/> Preliminary Amendment	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>1</u>]	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>Should be specifically itemized</i>	
5. Oath or Declaration [Total Sheets <u>3</u>]	15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (<i>if foreign priority is claimed</i>)	
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (<i>for a continuation/divisional with Box 18 completed</i>)	17. <input type="checkbox"/> Other: _____ Check _____	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</i>		
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		

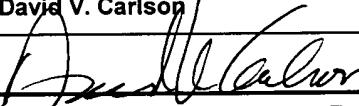
18. If a CONTINUING APPLICATION OR APPLICATION CLAIMING FOREIGN PRIORITY, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) Claims priority from European application No. 02425525.9 filed August 13, 2002

Prior application information Examiner _____ Group Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Correspondence address below		or:	Customer Number 00500
Firm Name			
Address			
City, State, Zip			
Country			
Telephone	Fax		
Name (Print/Type)	David V. Carlson	Registration No. (Attorney/Agent)	31,153
Signature		Date	August 7, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Mail Stop Patent Application, P.O. Box 1450, Alexandria, VA 22313-1450.

404287

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) **790**

Complete If Known	
Application Number	
Filing Date	August 7, 2003
First Named Inventor	Fernand Stroppiana
Examiner Name	
Group Art Unit	
Attorney Docket No.	670091.401

METHOD OF PAYMENT

Payment Enclosed:

Check Credit card Money Order Other

Deposit Account:

Deposit Account Number

19-1090

Deposit Account Name

Seed Intellectual Property Law Group PLLC

The Commissioner is authorized to (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee
 Charge any deficiencies

to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code 1001	Fee Code 2001	375 Utility filing fee	750
1002	2002	165 Design filing fee	
1003	2003	260 Plant filing fee	
1004	2004	375 Reissue filing fee	
1005	2005	80 Provisional filing fee	
SUBTOTAL (1)			(\$ 750)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	-20**	=	0	*	18	=	0	Fee Paid
Independent Claims	1	-3**	=	0	*	84	=	0
Multiple Dependent								

Large Entity	Small Entity	Fee Description
Fee Code 1202	Fee Code 2202	9 Claims in excess of 20
1201	2201	42 Independent claims in excess of 3
1203	2203	140 Multiple dependent claim, if not paid
1204	2204	42 ** Reissue independent claims over original patent
1205	2205	9 ** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$ 0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code 1051	Fee Code 2051	65 Surcharge - late filing fee or oath	
1052	2052	25 Surcharge - late provisional filing fee or cover sheet	
1053	1053	130 Non-English specification	
1812	2520	2520 For filing a request for ex parte reexamination	
1804	920*	920* Requesting publication of SIR prior to Examiner action	
1805	1840*	1840* Requesting publication of SIR after Examiner action	
1251	110	2251 55 Extension for reply within first month	
1252	410	2252 205 Extension for reply within second month	
1253	930	2253 465 Extension for reply within third month	
1254	1450	2254 725 Extension for reply within fourth month	
1255	1970	2255 985 Extension for reply within fifth month	
1401	320	2401 160 Notice of Appeal	
1402	320	2402 160 Filing a brief in support of an appeal	
1403	280	2403 140 Request for oral hearing	
1451	1510	1451 1510 Petition to institute a public use proceeding	
1452	110	2452 55 Petition to revive – unavoidable	
1453	1300	2453 650 Petition to revive – unintentional	
1501	1300	2501 650 Utility issue fee (or reissue)	
1502	470	2502 235 Design issue fee	
1503	630	2503 315 Plant issue fee	
1460	130	1460 130 Petitions to the Commissioner	
1807	50	1807 50 Processing fee for provisional applications	
1806	180	1806 180 Submission of Information Disclosure Stmt	
8021	40	8021 40 Recording each patent assignment per property (times number of properties)	40
1809	750	2809 375 Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810 375 For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801 375 Request for Continued Examination (RCE)	
1802	900	1802 900 Request for expedited examination of a design application	
Other fee (specify) _____			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40)

SUBMITTED BY

Name (Print/Type)	David V. Carlson	Registration No. Attorney/Agent	31,153
Firm Name/Address			
Signature	David V. Carlson		

404285

Customer Number

00500